

**DEPARTMENT OF SOCIAL AND HEALTH SERVICES
MEDICAL ASSISTANCE ADMINISTRATION
Olympia, Washington**

To: Hospice Agencies
Managed Care Plans
CSO Administrators
Regional Administrators

Memorandum No: 00-66 MAA
Issued: November 13, 2000

For More Information Call:
Toll Free: 1-800-562-6188

Supercedes: 99-58 MAA

From: James C. Wilson - Assistant Secretary
Medical Assistance Administration

Subject: NEW RATES FOR HOSPICE SERVICES

Effective for claims with dates of service on and after October 1, 2000, the Medical Assistance Administration (MAA) began using the hospice services maximum allowable rates listed on the attached billing instructions replacement pages (25-28) for MAA's Hospice Billing Instructions, dated May 1999.

To obtain this fee schedule electronically, go to MAA's website at <http://maa.dshs.wa.gov>. (Down the left margin, go to "Physicians (RBRVS) Fee Schedule".)

Please bill MAA your usual and customary fee.

Address all reimbursement questions or comments in writing to:

Professional Reimbursement Section
Division of Operational Support Services
Medical Assistance Administration
Department of Social and Health Services
PO Box 45510
Olympia, WA 98504-5510

Attachment

Hospice Revenue Codes

Enter the following revenue codes and service descriptions in the appropriate form locators.

<u>Code #</u>	<u>Description of Code</u>
651	<u>Routine Home Care</u> - The established rate is a capitated rate regardless of the volume or intensity of routine home care services provided on any given day.
652	<u>Continuous Home Care</u> - For every hour or part of an hour of continuous care, the hourly rate is reimbursed to the hospice <u>up to 24 hours a day</u> . Bill continuous care as a separate line entry on the UB-92 claim form for each day this level of care is provided.
653	<u>Nursing Facility Room and Board</u> - Enter the words " Room and Board " in form locator 43. Enter the nursing facility's name or provider number in form locator 83 or in the Remarks form locator.
655	<u>Inpatient Respite Care</u> <ol style="list-style-type: none"> 1) MAA will pay for respite care for a maximum of five (5) consecutive days. 2) MAA will deny the entire claim if the hospice agency bills for more than five (5) consecutive days of respite care. 3) Bill MAA for the sixth and subsequent days at the routine home care rate. 4) Itemize the individual days of inpatient respite care services on the UB-92 claim form. 5) If the client dies during the five-day respite period, bill MAA the respite rate for the <u>ending date of service</u>.
656	<u>General Inpatient Care</u> - Bill the day of discharge from the hospital at the routine home care rate. If the client dies in the hospital, bill MAA the general inpatient rate for the ending date of service.

Fee Schedule

Hospice Services Provided Inside Client's Home

Counties (Non-MSA & MSA Areas)	County Code	Routine Home Care (651)	Continuous Home Care Hourly (652)
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WASHINGTON

Non-MSA Areas

Adams, Asotin, Chelan, Clallam, Columbia, Cowlitz, Douglas, Ferry, Garfield, Grant, Grays Harbor, Jefferson, Kittitas, Klickitat, Lewis, Lincoln, Mason, Okanogan, Pacific, Pend Oreille, San Juan, Skagit, Skamania, Stevens, Wahkiakum, Walla Walla, Whitman	9950	\$109.76	\$26.69
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MSA Areas

Benton (Kennewick-Richland)	6740	\$115.56	\$28.10
Clark (Vancouver)	6440	\$113.70	\$27.65
Franklin (Pasco)	6740	\$115.56	\$28.10
Island	7600	\$116.06	\$28.22
King, Snohomish (Seattle-Everett)	7600	\$116.06	\$28.22
Kitsap (Bremerton)	1150	\$113.98	\$27.72
Pierce (Tacoma)	8200	\$117.46	\$28.56
Spokane (Spokane)	7840	\$112.40	\$27.33
Thurston (Olympia)	5910	\$113.38	\$27.57
Whatcom (Bellingham)	0806	\$116.83	\$28.41
Yakima (Yakima)	9260	\$108.91	\$26.48

* MSA = Metropolitan Statistical Area

Hospice Services Provided Outside Client's Home

Non-MSA Areas & MSA Areas	Provider Name	Inpatient Respite (655)	General Inpatient Care (656)
W A S H I N G T O N (cont.)			
Non-MSA Areas	Assured Home Health & Hospice	\$111.80	\$485.84
	Central Basin Home Health & Hospice	\$111.80	\$485.84
	Central Washington Hospital Hospice	\$111.80	\$485.84
	Community Home Health & Hospice	\$111.80	\$485.84
	Harbors Home Health Services	\$111.80	\$485.84
	Home Care of Kittitas Valley	\$111.80	\$485.84
	Hospice of the Gorge	\$111.80	\$485.84
	Tri-State Hospital Home Health & Hospice	\$111.80	\$485.84
	Walla Walla Community Hospice	\$111.80	\$485.84
	Whitman Home Health & Hospice	\$111.80	\$485.84

MSA Areas (Counties)

Benton (Kennewick- Richland)	Tri-Cities Chaplaincy	\$116.52	\$509.85
Clark (Vancouver)	Hospice Southwest	\$115.01	\$502.16
Franklin (Pasco)	Tri-Cities Chaplaincy	\$116.52	\$509.85
Island		\$116.93	\$511.91
King, Snohomish (Seattle-Everett)	Community Health Services	\$116.93	\$511.91
King, Snohomish (Seattle-Everett)	Eastside Hospice and Home Health	\$116.93	\$511.91
	Highline Home Health & Hospice	\$116.93	\$511.91
	Hospice of Seattle	\$116.93	\$511.91
	Hospice of Snohomish County	\$116.93	\$511.91
	Swedish Hospital Medical Center	\$116.93	\$511.91

* MSA = Metropolitan Statistical Area

Hospice Services Provided Outside Client's Home (cont.)

Non-MSA Areas & MSA Areas	Provider Name	Inpatient Respite (655)	General Inpatient Care (656)
W A S H I N G T O N (cont.)			
Kitsap (Bremerton)	Hospice of Kitsap County	\$115.23	\$503.30
Pierce (Tacoma)	Associated Health Services	\$118.07	\$517.71
	Good Samaritan Hospice	\$118.07	\$517.71
	St. Joseph Hospital (Franciscan)	\$118.07	\$517.71
Spokane (Spokane)	Hospice of Spokane	\$113.94	\$496.74
	Horizon Hospice	\$113.94	\$496.74
Thurston (Olympia)	Providence Sound Home Care	\$114.75	\$500.83
Whatcom (Bellingham)	Hospice of Whatcom County	\$117.56	\$515.13
Yakima (Yakima)	Hospice of Yakima	\$111.10	\$482.30
	Lower Valley Hospice	\$111.10	\$482.30
	Yakima Valley Home Health and Hospice (Memorial)	\$111.10	\$482.30
B O R D E R A R E A S			
Bonner, ID	Bonner Community Hospice	\$100.89	\$430.36
	Hospice of the Palouse	\$100.89	\$430.36
Multnomah, OR	Kaiser Permanente Home Health & Hospice	\$115.01	\$502.16

* MSA = Metropolitan Statistical Area



State of Washington
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
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